Medicaid Summary of Information

Information contained in this quick reference packet is not a complete comprehensive explanation of Medicaid benefits. It is intended to provide a brief overview of Medicaid services as they relate to children receiving CSA funding.

In the event that additional information is needed, please refer to the Department of Medical Assistance Services or the Medicaid HELPLINE at 1-800-552-8627.

DETERMINING ELIGIBILITY

Local departments of social services make eligibility determinations. In order to be eligible for benefits through Medicaid an individual must be: 1) a citizen of the United States or a qualified alien, and 2) a resident of Virginia.

Individuals evaluated to be eligible to receive benefits (as they pertain to CSA children) must fall within one of three categories. They are as follows:

- 1) <u>Categorically needy</u> individuals are Temporary Assistance to Needy Families (TANF) recipients, low income families with children, children under 21 in public or private child caring agencies, children under 21 in nursing facilities, children under 21 in subsidized adoptions, and individuals eligible for TANF but not receiving it.
- 2) <u>Medically indigent</u> are those qualified individual with income ranging from 100% to 200% of the Federal Poverty Guidelines. For those categorized in this group, there is a wide range of eligibility requirements, however, those listed above refer to their applicability to CSA children.
- 3) <u>Medically needy</u> recipients generally meet all the eligibility requirements for categorically needy coverage, except that their income exceeds the limit.

MEDICAID AND HMO PARTICIPATION (MEDALLION)

Medallion is a mandatory primary care case management program that enables Medicaid recipients to select a personal primary care physician (PCP) who will be responsible for providing or coordinating, or both, the services necessary to meet all of the health care needs. There are at least two HMO's per area that are contracted to serve Medicaid recipients. The program has two entities:

- 1) <u>Medallion and Medallion II</u> are mandatory programs within targeted geographic areas across the Commonwealth. Participants will be Medicaid eligible or Family Access to Medical Insurance Security Plan recipients.
- 2) **Options** is a voluntary program that is available for Medallion recipients in cities and counties not mandated to participate in another HMO program.

POINTS TO REMEMBER

- Mental health services covered by the Medicaid program must meet qualifications described under Provider Participation Requirements in the DMAS policy manual on Medicaid benefits.
- Services labeled community mental health or psychiatric services do not require a PCP referral. The provider may bill Medicaid directly for services rendered.
- If in doubt about services, contact the Medicaid HELPLINE at 1-800-552-8627.
- To access Medicaid providers/vendors use the DMAS website: www.cns.state.va.us/dmas. Once on the site, select provider search option.

ACRONYMS

LMHP- Licensed mental health professional- means a physician, licensed clinical psychologist, licensed professional counselor, licensed clinical social worker, or a psychiatric clinical nurse specialist.

QMHP- Qualified mental health professional- means a clinician in the health profession who is trained in providing psychiatric or mental health services to individuals who have a psychiatric diagnosis. Examples are as follows: physician, registered nurse, social worker, mental health worker (at least a bachelor's degree and 1 year of experience providing direct service).

PCP-Primary care physician

ISP- Individualized service plan- is a comprehensive plan outlining a treatment to address problematic areas.

EPSDT- Early and periodic screening, diagnosis and treatment- any Medicaid recipient must be certified as requiring in-patient or residential treatment by an independent team. For CSA children, FAPT may serve as this body.

ECO- Emergency custody order

TDO- Temporary detention order